



MCPB
ITEM NO. 2(2)
1-21-10

January 14, 2010

MEMORANDUM

TO: Montgomery County Planning Board
VIA: Dan Hardy, Chief *DH*
Move/Transportation Planning Division
FROM: Larry Cole: 301-495-4528, for Transportation Planning *LC*

ROUNDTABLE DISCUSSION: Bethesda Base Realignment and Closure (BRAC)

DISCUSSION PURPOSE: The nationwide Base Realignment and Closure (BRAC) includes the move of Walter Reed Army Medical Center from Washington, DC to the National Naval Medical Center (NNMC) by September 2011. The construction of the buildings is well underway.

The purpose of this discussion is to give the Planning Board background information on the array of responses to the transportation challenges posed by the BRAC move. As individual projects are submitted for Mandatory Referral review, this overview will be updated so that each project can be considered within the broader context of the full set of BRAC-related transportation projects. We expect that the intersections, bikeways, and transit improvements will be submitted in at least three separate Mandatory Referral reviews during the next several months.

Staff is not asking the Planning Board to make any decisions during the January 21 roundtable discussion. This discussion item will allow Planning staff to set the geographic, functional, and procedural context for the several Mandatory Referral reviews anticipated during spring 2011 and for Board members to ask questions of implementing agency staff.

Background

The Planning Board reviewed the BRAC Draft Environmental Impact Statement (EIS) on 1/10/08 and the Final EIS on 5/1/08. The transportation impacts to the Bethesda area caused by this move were addressed in the Transportation Management Plan (TMP) for NNMC (reviewed by the Board on 1/15/09), which set forth their goals for encouraging non-SOV commutes for their employees. There will also be a significant impact from the increase of almost a half-million visitors per year.

The Maryland Department of Transportation (MDOT), the State Highway Administration (SHA), and the Montgomery County Department of Transportation (MCDOT) have been working with other agencies and adjacent communities for about two years on ensuring that we have a transportation system that continues to function with this influx of traffic. These projects include:

- Transit access: Metrorail station improvements
- Bike/ped access: Implementing a bike/ped network focused on shared use path connections
- Vehicular access (all modes): Strategic improvements to accommodate person-throughput at the most congested intersections while minimizing the increase of pavement (converting turn lanes into shared lanes, dynamic signal timing, etc.)

The array of projects toward that end is shown in the BRAC Mobility Projects Matrix (Attachment 1). This matrix summarizes the current status of several types of projects:

- Projects 1 through 4 are on-campus projects, including travel demand management through the Transportation Management Plan
- Project 5 is enhanced access to the Medical Center Metrorail Station
- Project 6 is improvements at the four congested intersections affected by BRAC; Old Georgetown Road (MD 187) at Cedar Lane, Wisconsin Avenue (MD 355) at Cedar Lane, Wisconsin Avenue at Jones Bridge Road, and Connecticut Avenue (MD 185) at Jones Bridge Road
- Project 7 is a network of sidewalks and bike paths
- Projects 8 through 10 are proposed shuttle bus and kiss-and-ride improvements
- Projects 11 through 14 are other conceptual studies

The offsite improvements are grouped into tiers, as shown on Attachment 2, intended to guide the prioritization of projects depending on available funding, focusing on Items 5 through 7. The individual intersection projects in “Item 6, Improve Major Intersections” are shown as being split into multiple construction phases for funding and constructability reasons. A vicinity map of the area covered by all the projects is shown as Attachment 3.

The primary concerns regarding BRAC transportation system improvements to date have related to how the array of potential projects will be:

- Developed to best address multimodal needs in the corridor,
- Designed to minimize or mitigate adverse impacts, particularly to residential communities, and

- Coordinated through implementation from both design and funding perspectives.

On November 19, 2009, Chairman Hanson wrote to the Secretary of MDOT, Beverly Swaim-Staley, requesting that information on these concerns be provided in advance of the Mandatory Referral reviews of individual projects. The Chairman's letter is shown as Attachment 4 and the Secretary's response is shown as Attachment 5.

Master Plan guidance

The 1990 Bethesda-Chevy Chase Master Plan states (p. 97) that, *"In a developed area such as Bethesda-Chevy Chase, traffic growth cannot be easily served by highway expansion without causing serious impacts on adjacent residential properties. Additional transportation service in B-CC should be based on an expanded and vigorous program of transit and other mobility services."*

"Transportation Goals and Objectives (p. 19)

Achieve a significant shift of new travel from auto use to transit and other mobility alternatives.

- a. Provide an expanded and vigorous program of expanded transit and other mobility services and facilities.*
- b. Provide only moderate highway improvements, such as redesign of some intersections rather than addition of lanes to roads.*
- c. Provide improved access and safety for pedestrians and bicyclists."*

At the NNMC in particular, the Plan states (p. 93), *"Although no great influx of personnel is anticipated as of this writing, any future expansion at the Naval Medical Command should be accompanied by a transportation management program designed to minimize the use of single-occupant vehicles and to relieve traffic during peak hour periods."*

Two particular examples of the B-CC Master Plan recommendations raise questions as to how the proposed roadway projects should be reviewed.

The Plan states that Jones Bridge Road east of Connecticut Avenue should be improved *"to primary standards as necessary"* (p. 116); west of Connecticut Avenue, the Plan states that we should *"retain existing roadway width, except where intersection improvements are needed."* The current intersection design for Connecticut Avenue at Jones Bridge Road extends auxiliary lanes, unusual for a primary residential street, several hundred feet along Jones Bridge Road.

The Plan states that MD355 should be a six-lane divided roadway but that we should *"consider long-term widening to eight lanes from Cedar Lane to Woodmont Avenue if:*

- *Needed to accommodate Federal and Bethesda growth*
- *Will include HOV lane service in peak periods*
- *Endorsed by the County Council, as needed to reduce severe congestion"* (p.114)

Staff proposes that in such cases, the Master Plan language be used, in concert with community and stakeholder feedback, to guide our comments regarding design and operations.

We believe that the full multimodal transportation system in the Master Plan – pedestrian, bicyclist, and transit – should be implemented. MDOT/SHA should commit to providing good pedestrian and bicyclist accommodation within the wider impacted area, accommodation that is not limited to being adjacent to roadway improvements. Most of the non-auto facilities are clearly recommended in the Master Plan but while many of the roadway design elements may be necessary to address our current and projected traffic problems, their Master Plan support is not as clear.

One long-term master plan transportation improvement that is not proposed as part of the BRAC construction plan is the MD355/Cedar Lane interchange (Item #14 in Attachment 1). The review of improvements at MD 355/Cedar Lane will need to consider the level of permanence desired, considering that it may be decades before further improvements are implemented.

MDOT's BRAC program scope

The Master Plan's transportation recommendations are in line with the Maryland Smart Growth principles to "*Create walkable communities*", "*Provide a variety of transportation options*", and "*Foster distinctive, attractive communities with a strong sense of plan*", principles that are part of MDOT's BRAC program requirements.

While MDOT/SHA have evaluated the transportation system surrounding NNMC and are designing improvements to improve vehicular traffic, the effort on pedestrian and bicycle accommodation is not as comprehensive. Ped/bike improvements are proposed in conjunction with the intersection improvements, but not in a way that would provide a continuous quality accommodation. As the intersection designs have progressed and certain roadway improvements have been dropped, the adjacent ped/bike improvements have also been dropped. In particular, a completion of the North Bethesda Trail along Old Georgetown Road (MD187) is not included in the plans.

MCDOT has proposed pedestrian and bike improvements on Rockville Pike (MD355), Jones Bridge Road, and Cedar/West Cedar Lane, which would provide a great expansion in ped/bike accommodation in this area. The projects are currently proposed to be County-funded, rather than State or Federally-funded. Similarly, MCDOT is undertaking the study of access improvements to the Medical Center Metro Station.

Due in large part to the efforts of Congressman Van Hollen and Senators Mikulski and Cardin, the December 2009 Defense Appropriations Bill included \$300M in funding for BRAC-related transportation infrastructure at Bethesda and Fort Belvoir. A decision has not been made by the Department of Defense (DoD) as to how the \$300M in BRAC transportation funding for NNMC and Fort Belvoir would be divided, but the expectation is that the funds for NNMC will be allocated according to the Tiers shown on Attachment 2. The substantial level of funding needed for MCDOT should be recognized in the evaluation of federal and state participation. The pedestrian and bicyclist improvements planned by MCDOT are in Tier 1 and the Metro access

improvements are included in Tier 2. These projects therefore should be fully funded, regardless of funding source, before considering the proposed roadway improvements in Tier 3.

Design

Community members have asked our staff to provide the long-term vision of what this area should look like. In addition to relating to the Bethesda CBD and the planned development in White Flint, there is the question of what the physical improvements to this area should look like. What should be done right now? And, what provisions should be made toward accommodating those items that cannot be accomplished by the short 2011 timeframe that we have?

Efforts have been made by both SHA and MCDOT toward minimizing impacts to adjacent property while still building new transportation facilities. But the Master Plan (p. 30) envisions street trees in both the median and on both sides of the road along these major highways. Additional space may also be needed to underground the utilities along these highways.

The impacts of providing this expansion of the right-of-way falls into two groups: private property impacts and impacts to public land. Where the expanded typical section would affect private property, we believe that achieving trees in both the median and between the curb and sidewalk is not possible without great disruption. But we believe that having trees on the sides *or* in the median is necessary to maintain and enhance community character.

Where the landscaping would affect public land, and particularly along MD355 where there is public land on both sides of the road, we believe that the full landscaping treatment is desirable not just as a fulfillment of the Master Plan, but a recognition of the national importance of both NIH and NNMC.

The Countywide Bus Rapid Transit study that MCDOT is scheduled to begin shortly will examine a route along MD355 in this area, which we believe could be accommodated within the above B-CC Master Plan guidance for HOV lanes. In considering the ultimate impact on Federal property, should we be considering these lanes at this time? The answer would also potentially affect the design of the Metro station access improvements since whether the selected alternative is an underpass or a new elevator entrance on the west side of MD355, the length or location would be dependent on the roadway width.

It's unlikely that we will build the ultimate typical section at this time, but both federal agencies anticipate revising their Master Plans to accommodate the changes to their perimeters caused by BRAC. We recommend that the ultimate section be identified at this time and its impacts reflected in the property use and transfer agreements that are worked out with SHA and MCDOT.

BRAC MOBILITY PROJECTS MATRIX (WORK IN PROGRESS, AS OF 12-28-09)

NOTE: Bethesda BRAC interagency coordination group includes MDOT, MCDOT, MC BRAC Coordinator, MNCPPC, SHA, MTA, NNMC & NIH

<u>PROJECT</u>	<u>DESCRIPTION</u>	<u>PRIMARY AGENCY</u>	<u>OTHER AGENCIES</u>	<u>STATUS</u>	<u>TARGET COMPLETION</u>	<u>ESTIMATED COST</u>	<u>CURRENT FUNDING</u>
<u>ON-CAMPUS PROJECTS</u>							
1. NNMC On-Base Traffic Projects **	On-campus road and gate improvements to help off-campus traffic flow	NNMC	n/a	In NNMC Master Plan	Sept. 2011	n/a	funded in MilCon budget
2. North Wood Road Turn Lane **	Improve traffic flow on MD 355 at north gate	NNMC	MDOT/SHA NIH, MC-DOT	In NNMC Master Plan	Sept. 2011	\$1-2 million	funded in MilCon budget
3. 2-3 New NNMC Garages **	Additional parking for personnel and patients	NNMC	n/a	one garage in planning phase	Sept. 2011	n/a	two funded in MilCon budget
4. NNMC TMP **	Incentives for alternate modes of transportation	NNMC	MC-DOT	in Master Plan	Sept. 2011	n/a	funded in MilCon budget
<u>*** OFF-CAMPUS PROJECTS</u>							
5. East-side Metro Entrance/ Pedestrian Access Project **	Support increase transit use; gridlock relief; pedestrian mobility and safety	MC-DOT	NNMC, NIH, MDOT/MTA, WMATA	WMATA 7-29-09 Study <i>Final Report</i> ; County enviro study under way	Sept. 2011- Feb. 2012??	>\$15-60 million?	Defense Access Road certified 9-09/ \$20 mil in FY11 DOD budget/TIGER Grant? TEA Reauth?/***FY10
6. Improve Major Intersections **	Improve traffic & pedestrian movement at intersections serving NNMC	MDOT/SHA	MC-DOT NIH, NNMC, MNCPPC	D&E in progress; Public meetings 2009; 9/09 \$20 mil MDOT TIGER Application	Sept. 2011	~\$215 mil 4/09 ~\$111 m. 10/09	\$45.3 million/ ** +\$9.4 mil earmarks/ TIGER? / ***FY10
	<ul style="list-style-type: none"> • Cedar Lane @ Rockville Pike (MD 355) • Jones Bridge Road @ Rockville Pike (MD 355) • Jones Bridge Road @ Connecticut Avenue (MD 185) • Cedar Lane @ Old Georgetown Road (MD 187); includes Bethesda Trolley Trail extension south to NIH) 						
7. Pedestrian/Bike Paths **	Study, improve & complete paths around NNMC	MC-DOT	MDOT/SHA NIH, MNCPPC NNMC	Facilities Study in progress/In CIP	Sept. 2011	\$4.5-5 mil.	\$750K 4-09 OEA Study OKed / ***FY10
	<ul style="list-style-type: none"> • Cedar Lane (MD 187 to MD 355) • Cedar Lane bridge over Rock Creek • MD 355 (Cedar Lane to Jones Bridge Road) • Jones Bridge Road (MD 355 to MD 185) • Battery-Glenbrook neighborhoods (signage and safety upgrades) 						

8. Enhanced Express Commuter Bus Service **	Expand bus and depot capacity for more shuttle service	MC-DOT WMATA MDOT/MTA	NNMC, NIH	RideOn depot in County budget	Sept. 2011	\$5.3 million	possible State LOTS funds WMATA BRAC bus study conducted
9. Kiss & Ride drop-offs **	BIC proposed near gates at MD 355 & JBR	NNMC	WMATA MDOT/SHA	n/a	n/a **	n/a	Part of Navy gate or Metro entrance plans?
10. Coordinate w/NIH Shuttle Buses **	Cost-effective way to promote transit	NNMC/NIH	n/a	n/a	n/a	n/a	WMATA BRAC bus study conducted
11. Comprehensive Corridor Study **	Sustainable Transportation Corridors	SHA		n/a	n/a	n/a	BIC has recommended **
12. I-495 Beltway Ramp Study **	Determine feasibility of direct access to NNMC	MDOT/SHA MNCPPC	MC-DOT (supports study)	SHA: Project might not be feasible **	n/a	n/a	project might not be feasible **
13. Chevy Chase Valley Study	Study mobility and safety impacts of SHA intersecds	MC-DOT/	SHA/ MNCPPC	MC-DOT intends to fund study	FY2011? **	?	MC-DOT intends to conduct study
14. MD 355/Cedar Lane interchange	Grade separation to facilitate mobility	MDOT/SHA	MCDOT	In County Master Plan	n/a	>\$75 million	Not funded, not in MDOT CTP **

**** NOTES:**

***** FY2010 Defense Appropriations Act becomes Public Law 12-19-09 - includes \$300 million for comprehensive transportation mitigations around NNMC Bethesda and Fort Belvoir Community Hospital, TBD in report from DOD by late March 2010.**

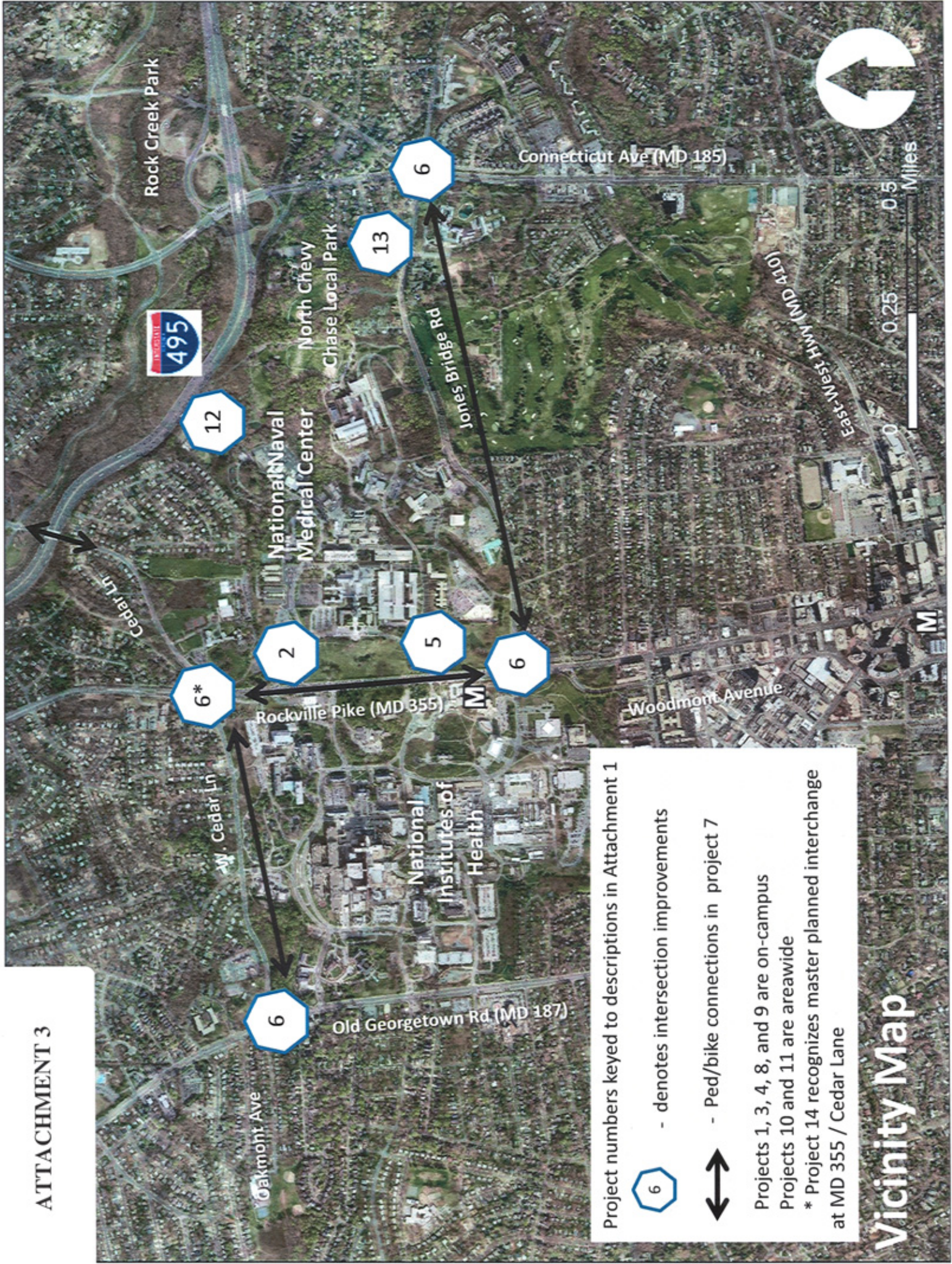
1. On-base traffic mitigations are detailed in NNMC Master Plan Update, submitted to NCPC November 7, 2008.
2. Navy has committed to making North Wood turn lane improvements in conjunction with improvements at North Wood Gate.
3. Second proposed garage is in budget but has not yet funded; third garage has not yet been budgeted.
4. TMP detailed in Master Plan Update, submitted to NCPC November 7, 2008.
5. Defense Access Road certification, 9-09. \$20 million placeholder in FY2011 DOD budget. WMATA feasibility study *Final Report 7-29-09* examined five options: shallow pedestrian tunnel with elevators/escalators at both ends; Deep east-side elevators to Metro platform; Combination of shallow pedestrian tunnel and deep east-side elevators; Pedestrian overpass; and No-build option with at-grade pedestrian safety enhancements (signage, signaling, islands etc.). MC-DOT submits 9-09 TIGER Grant request for "Multi-Modal Pedestrian Underpass."
6. \$45.3 million has been programmed through Sept. 2011, but \$15.9 million in out-year construction funding has been deferred. Current funding includes \$5 million FY08 and 09 congressional earmarks and \$500,000 OEA grant. Public Workshop, April 2, 2009 showed \$215 million worth of potential improvements. October 2009 "Tiers" plan shows estimate approx. \$111 million. Actual construction TBD; D&E to determine whether all mitigation proposals are feasible or within budget.
7. May 2009: DOD Office of Economic Adjustment approved \$750,000 for MC-DOT Facility Study (with BRAC Implementation Committee Input); CIP amendment pending.
8. Funds may be needed to acquire additional shuttle buses; WMATA/MDOT-MTA conducting statewide BRAC bus studies.
9. BRAC Implementation Committee has proposed Navy add Kiss and Ride drop-offs near its gates along MD 355 and Jones Bridgder Road to facilitate traffic flow. May be included in Navy gate improvements.
10. BIC has proposed that NNMC work with NIH to coordinate shuttle bus needs. See also Number 8.
11. BIC has proposed a greater area-wide transportation study incorporating concepts of Sustainable Transportation Corridors.
12. SHA has issued a *technical white paper* detailing why a Beltway ramp to NNMC might not be feasible.
13. MC-DOT to study ingress, egress, and safety issues and potential mitigations affecting Chevy Chase Valley community at MD 185/Jones Bridge/Spring Valley Rd.
14. Grade separated interchange in Bethesda Master Plan. Not funded and not included in MDOT Consolidate Transportation Plan.

Description of “Tiers” and “Phases” of Intersections Improvement Program -- November 17, 2009

- **Tier One** includes projects for which funding has been identified and is, or soon will be, available.
- **Tier Two** Projects would be funded by anticipated under the Defense Access Road (DAR) program and by TIGER Grant requests, if approved.
 - **\$20 million TIGER Grant request for pedestrian underpass** at Medical Center Metro station. This request was submitted in two forms – as a stand-alone request by the County, and as part of a much larger regional COG Transit-oriented development grant;
 - **\$20 million anticipated funding for the pedestrian underpass** under the Defense Access Road program (this has been penciled into the FY2011 DOD budget).
 - **\$20 million for BRAC intersections improvements**, part of a larger MDOT TIGER Grant request for state-wide BRAC intersections
- **Tier Three** projects do not have identified sources of funding.
- **Tier Four** includes long-range concepts that require planning before they can move forward as meaningful projects.
- **TIER ONE PROJECTS – FUNDED:**
 - **Rockville Pike @ Cedar Lane, Phases 1 and 2** – these take place along MD 355 south of Cedar Lane:
 - Add one southbound lane with a dedicated right turn into Wilson Drive (NIH);
 - Add one northbound lane from North Wood Drive (NNMC) with a dedicated right turn onto Cedar Lane;
 - Add a ½ signal (a.m. peak only) to facilitate southbound left turns into North Wood Drive;
 - Increase southbound left turn storage at North Wood Drive;
 - Add northbound left turn storage at NIH inspection facility;
 - Replace two culverts beneath 355/Cedar Lane;
 - Re-striping, but not widening, on Cedar Lane to facilitate turns and traffic flow
 - **Connecticut Ave @ Jones Bridge Road, Phase I:**
 - Add one southbound lane from I-495 with a dedicated right turn onto Jones Bridge Road

- **Rockville Pike @ Jones Bridge Road, Phase 1-A:**
 - Dynamic Lane Control -- variable electronic signaling to create two southbound left turn lanes onto JBR during the pm peak.
- **TIER TWO PROJECTS – DAR & TIGER REQUESTS PENDING:**
 - **Rockville Pike @ Jones Bridge Road, Phase 1-B:**
 - Add one southbound lane adjacent to NIH, in order to create permanent double-left turn onto Jones Bridge Road.
 - **Connecticut Ave. @ Jones Bridge Road, Phase 3** (note that Phase 2 is in Tier Three):
 - Reduce the median on Connecticut Avenue, north and south of Jones Bridge Road, to create an additional northbound lane.
 - **Old Georgetown Road @ Cedar Lane, Phase 1** (project's only phase):
 - Extend Trolley Trail south from north of Cedar Lane to NIH;
 - Widening along southbound Old Georgetown Road south of Cedar Lane in order to create new northbound lane with a dedicated right turn onto Cedar Lane
- **TIER THREE PROJECTS -- NOT FUNDED:**
 - **Rockville Pike @ Cedar Lane, Phases 3-5:**
 - Widen Cedar Lane east and west of Rockville Pike to create dedicated turn lanes and realign culverts along Cedar Lane;
 - Create an additional northbound lane north of Cedar Lane by widening along the ROW adjacent to, but not infringing upon, the service road parallel to MD 355.
 - Create an additional southbound lane north of Cedar Lane, to be a dual right turn onto Cedar Lane and through lane along MD 355.
 - **Connecticut Ave. @ Jones Bridge Road, Phase 2:**
 - Widen Jones Bridge Road west and east of Connecticut Avenue along the south side of Jones Bridge Road in order to create an additional left turn lane onto northbound Connecticut Avenue and reduce congestion along JBR east of Connecticut Avenue during the pm rush.
 - Safety concerns were raised about multiple left-turns and weaving during the pm rush.
- **TIER FOUR PROJECTS – Concepts requiring further study:**
 - **Concepts include but aren't limited to: direct Beltway access to NNMC, an interchange at 355/Cedar Lane, bus access improvements, enhanced Metro capacity, and a wider area-wide corridor study.**

ATTACHMENT 3



Project numbers keyed to descriptions in Attachment 1



- denotes intersection improvements



- Ped/bike connections in project 7

Projects 1, 3, 4, 8, and 9 are on-campus

Projects 10 and 11 are areawide

* Project 14 recognizes master planned interchange at MD 355 / Cedar Lane

Vicinity Map



MONTGOMERY COUNTY PLANNING BOARD
THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION

OFFICE OF THE CHAIRMAN

November 19, 2009

Ms. Beverley Swaim-Staley, Secretary
Maryland Department of Transportation
7201 Corporate Center Drive
P.O. Box 548
Hanover, Maryland 21076

RE: Bethesda BRAC at NNMC
Mandatory Referral Reviews for Transportation Improvements

Dear Ms. Swaim-Staley:

As you know, the State Highway Administration has been working on the design of the improvements to four intersections in the area of the National Naval Medical Center as part of MDOT's larger overall effort to prepare for the arrival of the Walter Reed Army Medical Center. These intersection projects require a Mandatory Referral to the Montgomery County Planning Board and we request that the information outlined below be provided in conjunction with the plans submitted for review.

The Montgomery County BRAC Implementation Committee has expressed the need to create a comprehensive timeline of all the projects and actions that are required to make Walter Reed's move to NNMC a successful one. As each project moves forward, it is important to be able to demonstrate to all stakeholders how it contributes to the comprehensive, multimodal vision for both addressing BRAC impacts and furthering implementation of the area master plan.

We request that MDOT help us further develop that knowledge base by providing a common set of project descriptions and evaluation measures that can be applied to each of the individual transportation projects. The four intersection projects currently under design by the State Highway Administration are scheduled to be the first in the BRAC program of offsite improvements to be reviewed by the Planning Board.

First, the submission materials for each improvement should incorporate the following information:

- A description of the purpose and need.

ATTACHMENT 4

- A common, consistent set of baseline volumes for autos, transit users, pedestrians, and bicyclists, and growth factors that reflect the assumed background growth, BRAC actions, and proposed Transportation Management Programs.
- A description of how purpose and need is satisfied by improvements, with evaluation criteria such as Level of Service for traffic or Quality of Service for transit, bikes and pedestrians; person-throughput on the roadway system; or walking distances and times to station portals.

Second, each project submission should indicate current plans and responsibilities for phasing and funding; the four-tiered transportation investment priorities listing is a good starting point. The plans should show the work to be accomplished in each tier and should note where adjoining work will be constructed by others. The physical and procedural connections between the projects should be defined and their status monitored as each project moves forward. Information in the mandatory referral submission should clarify the following elements for decision-makers:

- The design of each project may need to preserve expansion potential to connect to or accommodate future projects on the priority list. For instance, the scope of future sidewalk and shared use path improvements in Tiers 1 through 3 should not be limited by adjacent roadway work being built first. We would also like to confirm that County pedestrian and bicycle projects implemented in response to BRAC will receive priority for state enhancement funding.
- Conversely, we should confirm the degree to which projects deferred until Tier 4 should be incorporated in the design of near-term projects.
- The State's BRAC website identifies MTA as the lead for the study for improvements at the Medical Center Metro Station. Please confirm that MDOT will remain the lead agency for this project and will consult with NCPC, MNCPPC, and BIC on the selection of the alternative to move forward to construction.

Finally, the mandatory referral review for the SHA intersection projects should address the following concerns:

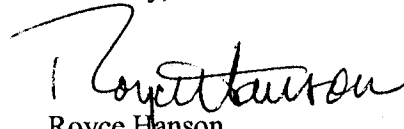
- We understand that the on-road bike accommodation recommended in SHA's Bicycle & Pedestrian Design Guidelines will not be provided so that a larger buffer can be maintained between the shared use path and the curb. Please confirm that no other waivers will be needed.

Ms. Beverley Swaim-Staley
November 19, 2009
Page 3

- How will transit and/or HOV travel through these intersections be prioritized? How will this prioritization be increased or enhanced by the Tier 2 and Tier 3 improvements?
- What level of service (LOS) is the goal for drivers with the Tier 1 intersection improvements in the 2011 design year? What LOS would be achieved with the Tier 2 and Tier 3 improvements?

Thank you in advance for providing the above information. We look forward to continuing to work with you on these important projects. If you have any questions concerning our request, please call Larry Cole at 301-495-4528 or you may call me at 301-495-4605.

Sincerely,



Royce Hanson
Chairman

cc: District 16 Delegation
District 18 Delegation
Councilmember Roger Berliner
John Carman
Phil Alpersen



Maryland Department of Transportation
The Secretary's Office

Martin O'Malley
Governor

Anthony G. Brown
Lt. Governor

Beverley K. Swaim-Staley
Secretary

Harold M. Bartlett
Deputy Secretary

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OFFICE OF THE SECRETARY
THE MARYLAND-NATIONAL CAPITAL
PARK AND PLANNING COMMISSION

December 28, 2009

Mr. Royce Hanson, Chairman
Maryland-National Capital Park and
Planning Commission
8787 Georgia Avenue
Silver Spring MD 20910

Dear Mr. Hanson:

Thank you for your letter regarding the Maryland Department of Transportation's (MDOT) effort to prepare for the expansion of the National Naval Medical Center (NNMC) and the arrival of Walter Reed Army Medical Center. I appreciate your interest in the Base Realignment and Closure (BRAC) projects.

The State Highway Administration (SHA) recognizes that the BRAC intersection improvement projects in Montgomery County need to go through the Mandatory Referral process. The Mandatory Referral submission to the Montgomery County Planning Board will include information and answers to many of the questions and issues raised in your letter. We will continue to work with the Maryland-National Capital Park and Planning Commission (M-NCPPC) to ensure that its requests are accommodated.

The SHA used the traffic numbers projected in the Navy's Draft Environmental Impact Statement to determine the necessary improvements. We collaborated and received concurrence from M-NCPPC staff with this approach at the beginning of the BRAC planning process. In order to use consistent analyses for all of our improvements, only one set of baseline traffic numbers will be used. With the intention of enhancing the multimodal quality of service, SHA is proposing modifications, including new pavement and sidewalks; safer pedestrian crossings; shared-use paths; wide outside lanes for bicycles; and enhanced pedestrian facilities.

The MDOT supports Montgomery County's Master Plan and its desire for a multimodal approach. The MDOT stands by its policy to construct Master Plan amenities, such as shared-use paths, within MDOT's limits of work, with support from the affected property owners. In addition, where feasible, SHA has either minimized the right-of-way needed or developed alternate alignments that do not jeopardize future construction of trails and other Master Plan items, such as the grade-separated interchange at Rockville Pike and Cedar Lane. On-road bicyclists will be provided with a wider outside lane for limited bicycle accommodations. This limitation requires a bicycle waiver. We do not anticipate any other waivers to be necessary for the intersection projects that are funded for construction.

My telephone number is 410-865-1000
Toll Free Number 1-888-713-1414 TTY Users Call Via MD Rr
7201 Corporate Center Drive, Hanover, Maryland 21076

Mr. Royce Hanson
Page Two

Montgomery County will be the lead agency for delivery of the underpass project at Medical Center Metro. Consistent with Defense Access Roads Program protocols, it is anticipated that MDOT will enter into a project management agreement with Montgomery County, the Federal Highway Administration, and the Department of Defense to address MDOT's role as a funding conduit for federal funds for the project. Montgomery County has indicated that it will consult with appropriate agencies and local stakeholders, as it considers project alternatives and proceeds toward implementation.

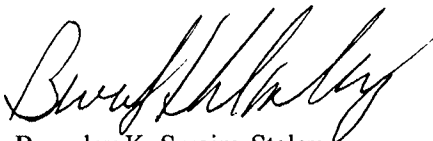
In prioritizing high occupancy vehicle and transit options, SHA's focus has been on pedestrian, bicycle, and vehicle accommodations that will preserve the system and accommodate BRAC traffic. The SHA has been closely coordinating with the Washington Metropolitan Area Transit Authority, the Maryland Transit Administration (MTA), and Montgomery County on the Medical Center Station tunnel options, as well as with MTA on the Purple Line project.

The goal for all of these projects, including Tier 1 projects, which will occur in 2011, has been to achieve Level of Service (LOS) E operations or better at each priority intersection after the BRAC relocation. However, given the geometric, environmental, and financial constraints, we revised the goal to reflect LOS operations as good, or better than, pre-BRAC conditions for as long as possible into the future. The Tier 2 and Tier 3 projects have similar goals, but extend the service life of the intersections.

The BRAC intersection improvements in the Montgomery County area are a small part of the total transportation effort that MDOT has supported in Montgomery County. Concerning a comprehensive timeline, the tiers were determined based on available resources. Therefore, as funding becomes available, we will be able to finalize the timeline for all tiers. The timeline for the completion of design and construction for BRAC projects includes only Tier 1 projects. It will not be possible to determine schedules for Tiers 2, 3, and 4 until funding is secured.

Thank you again for your letter. I appreciate hearing from you and thank you for your concerns about the intersection projects and preservation of the Master Plan. If we may be of further assistance, please do not hesitate to contact me or Ms. Barbara L. Solberg, Assistant Division Chief, Highway Design Division, SHA at 410-545-8830, toll-free 888-228-5003 or via email at bsolberg@sha.state.md.us.

Sincerely,



Beverley K. Swaim-Staley
Secretary

cc: Mr. Neil J. Pedersen, Administrator, SHA
Ms. Barbara L. Solberg, Assistant Chief, Highway Design Division, SHA